2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39270

FILED Apr 28, 2009 Secretary of State

Entity Name: BIT AND SPUR SADDLE CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

DUVAL/AIRPORT ROAD 13275 RANCH RD

JACKSONVILLE, FL 322180252 JACKSONVILLE, FL 322180252 US

Current Mailing Address: New Mailing Address:

P.O. BOX 26252 JACKSONVILLE, FL 32226

FEI Number: 59-3289998 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOILMAN, OSCAR SATTLER, MARTIN
7208 NW 180TH ST 2600 SCARWIN LANE
14 OKOAN WILLE EL 2000S

STARKE, FL 32091 US JACKSONVILLE, FL 32226 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARTIN SATTLER 04/28/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: PD (X) Change () Addition

 Name:
 HOILMAN, OSCAR
 Name:
 SATTLER, MARTIN

 Address:
 7208 N.W. 180TH ST
 Address:
 2600 SCARWIN LANE

 City-St-Zip:
 STARKE, FL 32091
 City-St-Zip:
 JACKSONVILLE, FL 32226

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 SALTER, MARTIN
 Name:
 MARQUETTE, JEFFREY

 Address:
 2600 SCARWIN LN
 Address:
 14676 CAPSTAN DR.

 City-St-Zip:
 JACKSONVILLE, FL 32226
 City-St-Zip:
 JACKSONVILLE, FL 32226

Title: SD () Delete Title: () Change () Addition

 Name:
 MILLER, SANDY
 Name:

 Address:
 3197 ARNOLD RD
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32218
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 LYBRAND, ELIZABETH
 Name:

 Address:
 9813 PLUMMER ROAD
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32219
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTIN SATTLER PD 04/28/2009